

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the U.S. Postal Service with sufficient postage as first class mail in an envelope addressed to: Assistant Commissioner for Patents, PO Box 1450, Alexandria, VA 22313-1450 on 11 October 2005

Jeannie Camara

(Typed or Printed Name of Person Mailing Paper or Fee)

Jeannie Camara
(Signature of Person Mailing Paper or Fee)

PATENT APPLICATION
Attorney Docket No. OR99-17401

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

IN RE PATENT APPLICATION OF)

Vipin Samar)

Serial No. 09/539,266)

Filing Date: 30 March 2000)

For: METHOD AND APPARATUS FOR)
SHARING A SECURE CONNECTION)
BETWEEN A CLIENT AND MULTIPLE)
SERVER NODES)

Examiner: England, David E.

Group Art Unit: 2143

AMENDMENT TRANSMITTAL LETTER

M/S: Non-Fee Amendment
Commissioner for Patents
PO Box 1450
Alexandria, VA 22313-1450

Sir:

In connection with the above-referenced U. S. patent application, transmitted herewith are the following papers:

- ☒ Response under 37 C.F.R. § 1.111 to official action mailed **25 August 2005**.
- ☐ A petition for extension of time is also enclosed with a fee of \$55.00 for a one-month extension for a small entity.
- ☐ Terminal disclaimer under 37 C.F. R. § 1.321(c), including
 - ☐ check for \$110.00 fee under 37 C.F.R. § 1.20(d), and
 - ☐ 2 certificates under 37 C.F.R. § 3.73(b).
- ☐ Information disclosure statement, form 1449 and ___ references.
- ☒ No additional claims fees are required.

☐ An additional fee is required, and is calculated as shown below:

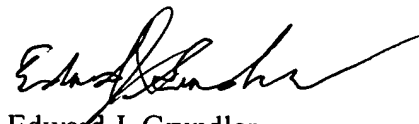
| AMENDED CLAIMS | | | | | |
|--|---------------|---|--------------|----------|-----------|
| | NO. OF CLAIMS | HIGHEST NO. OF CLAIMS PREVIOUSLY PAID FOR | EXTRA CLAIMS | RATE | ADDTL FEE |
| Total Claims | | MINUS = 20 | 0 | x \$18 = | |
| Independent Claims | | MINUS = 3 | 0 | x \$78 = | |
| If Amendment adds multiple dependent claims, add \$260.00 | | | | | |
| Total Amendment Fee | | | | | |
| If small entity status is claimed, subtract 50% of Total Amendment Fee | | | | | |
| TOTAL ADDITIONAL FEE DUE FOR THIS AMENDMENT | | | | | \$0.00 |

- ☐ A check in the amount of \$____ is enclosed.
☐ Charge \$____ to Deposit Account No. ____ (Docket No. ____).
☒ Please deduct any underpayments, credit any overpayments, and charge all required extension of time fees to Deposit Account Number 50-1003. (Docket No. OR99-17401)

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Respectfully submitted,

By



Edward J. Grundler
Registration No. 47,615

Date: 11 October 2005



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Application Number : 09/539,266
Applicant : Vipin Samar
Filed : 30 March 2000
TC/A.U. : 2143
Examiner : England, David E.

Confirmation Number: 8991

Docket Number : OR99-17401
Customer No. : 51,067

Commissioner for Patents
M/S Non-Fee Amendment
P.O. Box 1450
Alexandria VA 22313-1450

AMENDMENT

Sir

In response to the office action of **25 August 2005**, please amend the above-identified application as follows:

Amendments to the Claims are reflected in the listing of claims which begins on page 2 of this paper.

Remarks/Arguments begin on page 11 of this paper